

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Midwest Values PAC

ADDRESS (number and street)

P.O. Box 583232

☐Check if different  
than previously  
reported. (ACC)

Minneapolis

MN

55458

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00416131

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2010

through

04

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Borman

Signature of Treasurer

Electronically Filed by Thomas Borman

Date

05

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 29

Write or Type Committee Name  
Midwest Values PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	51703.56
(b) Cash on Hand at Beginning of Reporting Period .....	158321.28	
(c) Total Receipts (from Line 19) .....	85142.61	361343.96
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	243463.89	413047.52
7. Total Disbursements (from Line 31) .....	70522.99	240106.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	172940.90	172940.90
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 29

Write or Type Committee Name

Midwest Values PAC

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 1 0

To:

M M  
0 4D D  
3 0Y Y Y Y  
2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	8600.00	220764.00
(ii) Unitemized .....	71542.00	133375.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	80142.00	354139.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	85142.00	360139.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	1203.17
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.61	1.79
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	85142.61	361343.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	85142.61	361343.96

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	59022.99	165681.62	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	59022.99	165681.62	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	72500.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	425.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	425.00	
29. Other Disbursements.....	1500.00	1500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	70522.99	240106.62	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70522.99	240106.62	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 29

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	85142.00	360139.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	425.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	85142.00	359714.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	59022.99	165681.62
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1203.17
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	59022.99	164478.45

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Book

Mailing Address 491 Coconut Palm Terrace

City

Plantation

State

FL

Zip Code

33324

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	0

Transaction ID: C3840093

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Richard D Butler

Mailing Address PO Box 100

City

Faith

State

SD

Zip Code

57626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

Transaction ID: C4038819

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Darrell B Carter

Mailing Address 13340 Arnold Drive

City

Glen Ellen

State

CA

Zip Code

95442

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	0

Transaction ID: C3839024

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

3050.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Nancy Giles

Mailing Address 1 Carroll Pl

City

Weehawken

State

NJ

Zip Code

07086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Actor/Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Transaction ID: C4039842

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Carolyn Glenn

Mailing Address 590 Montcalm Place

City

Saint Paul

State

MN

Zip Code

55116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 1 0

Transaction ID: C3828876

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mark H Haller

Mailing Address 508 S 12th St

City

Philadelphia

State

PA

Zip Code

19147-1137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Piano Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

Transaction ID: C4038508

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

850.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Susan Kay

Mailing Address 2640 Benedict Canyon Dr

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shriners Hospitals for Ch-  
ildren

Occupation  
Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: C4004667

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Judith Krantz

Mailing Address 166 Groverton Pl

City

Los Angeles

State

CA

Zip Code

90077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

Transaction ID: C4039627

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Brigid McDonough

Mailing Address 126 Mackubin St

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Briggs and Morgan

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

Transaction ID: C3999900

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Brockway McMillan

Mailing Address PO Box 27

City

Sedgwick

State

ME

Zip Code

04676

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 0

Transaction ID: C4039063

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Brockway McMillan

Mailing Address PO Box 27

City

Sedgwick

State

ME

Zip Code

04676

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

Transaction ID: C4039064

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Brockway McMillan

Mailing Address PO Box 27

City

Sedgwick

State

ME

Zip Code

04676

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Transaction ID: C4039065

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Eric Palmer

Mailing Address 1421 Sherman Ave Unit 204

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City Of Evanston Illinois

Occupation

Dir. of Communcations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 1 0

Transaction ID: C4038869

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Laura S Paulson

Mailing Address 655 Park Ave Apt 7C

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Christi's Ink

Occupation

Deputy Chairman Art Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 1 0

Transaction ID: C4038743

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Melissa Rasman

Mailing Address 19 Sandtrap Cir

City

Warminster

State

PA

Zip Code

18974

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hay Group

Occupation

Benefits Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 1 0

Transaction ID: C4039352

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Michael Reinke

Mailing Address R9701 County Rd Q

City

Hatley

State

WI

Zip Code

54440-9765

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation  
Mail Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

Transaction ID: C4038480

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Leif Selkregg

Mailing Address 935 Ashland Ave

City

River Forest

State

IL

Zip Code

60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rise Group

Occupation  
Project Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

Transaction ID: C4038738

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

John B Stadler

Mailing Address 9 Serpentine Trl

City

Larchmont

State

NY

Zip Code

10538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 1 0

Transaction ID: C4038664

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Burton V Wides

Mailing Address 3069 Porter St NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

Transaction ID: C4039597

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Elisa Wolfe

Mailing Address PO Box 516

City

Granville

State

OH

Zip Code

43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 0

Transaction ID: C4039134

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Elisa Wolfe

Mailing Address PO Box 516

City

Granville

State

OH

Zip Code

43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

Transaction ID: C4039135

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

8600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Writers Guild of America West PAC

Mailing Address 555 Capitol Mall

City

Sacramento

State

CA

Zip Code

95814

FEC ID number of contributing  
federal political committee.

**C**

C00455394

Name of Employer

Occupation

Receipt For:

☐ ☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

Transaction ID: C4000157

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) A.J. Goodman Consulting	<b>Transaction ID:</b> D251335 <b>Date of Disbursement</b>																				
Mailing Address 444 Brickell Ave #51-470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Miami State FL Zip Code 33131	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting - Fundraising	<table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D251341 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53582	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Phoenix State AZ Zip Code 85072	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td colspan="10">4.95</td> </tr> </table>	4.95																			
4.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D251345 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53582	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	5		2	0	1	0												
City Phoenix State AZ Zip Code 85072	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td colspan="10">248.10</td> </tr> </table>	248.10																			
248.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6253.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO Box 53582

City State Zip Code  
Phoenix AZ 85072

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)  
Blue State Digital, LLC

Mailing Address 1000 Vermont Avenue, NW

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Web Site

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251422

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City State Zip Code  
Plymouth MN 55442

Purpose of Disbursement  
Accounting & Compliance Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2710.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
Cooperative Print Solutions

Mailing Address PO Box 9438

City Minneapolis State MN Zip Code 55440

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251337

Date of Disbursement

04 / 01 / 2010

Amount of Each Disbursement this Period

3016.47

**B.**

Full Name (Last, First, Middle Initial)  
Cybersource

Mailing Address 1295 Charleston Rd.

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251340

Date of Disbursement

04 / 01 / 2010

Amount of Each Disbursement this Period

20.23

**C.**

Full Name (Last, First, Middle Initial)  
Cybersource

Mailing Address 1295 Charleston Rd.

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251343

Date of Disbursement

04 / 02 / 2010

Amount of Each Disbursement this Period

14.45

**SUBTOTAL** of Disbursements This Page (optional) .....

3051.15

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Cybersource</p> <p>Mailing Address 1295 Charleston Rd.</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251344</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>55.46</div> </div> </p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Cybersource</p> <p>Mailing Address 1295 Charleston Rd.</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251431</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>34.80</div> </div> </p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Kris Dahl</p> <p>Mailing Address 1421 Belmont St. NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251357</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>600.00</div> </div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**690.26**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)  
Dinah Dale Consulting, Inc.

Mailing Address 131 Burntside Drive

City State Zip Code  
Golden Valley MN 55422

Purpose of Disbursement  
Consulting - Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D251334

Date of Disbursement

04 / 01 / 2010

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)  
EFTPS - US Treasury

Mailing Address P.O. Box 173788

City State Zip Code  
Denver CO 80217

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D251400

Date of Disbursement

04 / 15 / 2010

Amount of Each Disbursement this Period

522.24

C.

Full Name (Last, First, Middle Initial)  
EFTPS - US Treasury

Mailing Address P.O. Box 173788

City State Zip Code  
Denver CO 80217

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D251401

Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

522.28

**SUBTOTAL** of Disbursements This Page (optional) .....

5044.52

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Elan	<b>Transaction ID:</b> D251427 <b>Date of Disbursement</b>
Mailing Address 7300 Chapman Hwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 1 0</div> </div>
City Knoxville State TN Zip Code 37920	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Fees	<div>93.57</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Hudson Bay of Illinois	<b>Transaction ID:</b> D251420 <b>Date of Disbursement</b>
Mailing Address 11032 Vera Cruz Ave. N.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 1 0</div> </div>
City Champlin State MN Zip Code 55316	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telemarketing	<div>1725.45</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mal Warwick and Associates	<b>Transaction ID:</b> D251413 <b>Date of Disbursement</b>
Mailing Address 2550 Ninth Street, Ste. 103	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 1 0</div> </div>
City Berkeley State CA Zip Code 94710	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Direct Mail	<div>23872.80</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**25691.82**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
MN Department of Revenue

Mailing Address Mail Station 1173

City State Zip Code  
Saint Paul MN 55146

Purpose of Disbursement  
Payroll Taxes  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251402

Date of Disbursement

/   /

Amount of Each Disbursement this Period

96.50

**B.**

Full Name (Last, First, Middle Initial)  
MN Department of Revenue

Mailing Address Mail Station 1173

City State Zip Code  
Saint Paul MN 55146

Purpose of Disbursement  
Payroll Taxes  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251403

Date of Disbursement

/   /

Amount of Each Disbursement this Period

96.50

**C.**

Full Name (Last, First, Middle Initial)  
Nova

Mailing Address 23801 Calabasas Road, Ste. 2005

City State Zip Code  
Calabasas CA 91302

Purpose of Disbursement  
Credit Card Fees  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

**SUBTOTAL** of Disbursements This Page (optional) .....

253.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mary C. Pardue	<b>Transaction ID:</b> D251392 <b>Date of Disbursement</b>																				
Mailing Address 2901 Knox Avenue S., #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Minneapolis State MN Zip Code 55408	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td>478.19</td> </tr> </table>	478.19																			
478.19																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mary C. Pardue	<b>Transaction ID:</b> D251393 <b>Date of Disbursement</b>																				
Mailing Address 2901 Knox Avenue S., #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	1	0												
City Minneapolis State MN Zip Code 55408	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td>478.18</td> </tr> </table>	478.18																			
478.18																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Peggy Shapiro Graphic Design Inc.	<b>Transaction ID:</b> D251336 <b>Date of Disbursement</b>																				
Mailing Address 2555 N. Clark St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Chicago State IL Zip Code 60614	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Design Services	<table border="1"> <tr> <td>600.00</td> </tr> </table>	600.00																			
600.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1556.37

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
Perkins Coie

Mailing Address 1201 Third Ave., Ste. 4800

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251338

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.50

**B.**

Full Name (Last, First, Middle Initial)  
Travelocity

Mailing Address 4200 Buckingham Blvd.

City State Zip Code  
Fort Worth TX 76155

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251358

Date of Disbursement

/   /

Amount of Each Disbursement this Period

252.80

**C.**

Full Name (Last, First, Middle Initial)  
Travelocity

Mailing Address 4200 Buckingham Blvd.

City State Zip Code  
Fort Worth TX 76155

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251411

Date of Disbursement

/   /

Amount of Each Disbursement this Period

626.47

**SUBTOTAL** of Disbursements This Page (optional) .....

934.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251412

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251408

Date of Disbursement

/   /

Amount of Each Disbursement this Period

326.70

**C.**

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D251409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

371.70

**SUBTOTAL** of Disbursements This Page (optional) .....

798.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P.O. Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251410</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="119.70"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address P.O. Box 650580</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251423</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="69.89"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 100 S. 1st Street</p> <p>City Minneapolis State MN Zip Code 55401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251356</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2200.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2389.59**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 100 S. 1st Street</p> <p>City Minneapolis State MN Zip Code 55401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251342</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.30"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Natalie Volin</p> <p>Mailing Address 67 Otis Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251395</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="635.58"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Natalie Volin</p> <p>Mailing Address 67 Otis Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251396</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="635.58"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1298.46**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Well & Lighthouse, LLC	<b>Transaction ID:</b> D251407 <b>Date of Disbursement</b>																				
Mailing Address 1724 - 20th St. NW, Ste. 302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	1	0												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting - Web Site	<table border="1"> <tr> <td colspan="10">4320.00</td> </tr> </table>	4320.00																			
4320.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Well & Lighthouse, LLC	<b>Transaction ID:</b> D251347 <b>Date of Disbursement</b>																				
Mailing Address 1724 - 20th St. NW, Ste. 302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	1	0												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting - Web Site	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Dylan Woehrlie	<b>Transaction ID:</b> D251390 <b>Date of Disbursement</b>																				
Mailing Address 2433 Emerson Ave. S.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Minneapolis State MN Zip Code 55405	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">510.19</td> </tr> </table>	510.19																			
510.19																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6830.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Dylan Woehrle

Mailing Address 2433 Emerson Ave. S.

City State Zip Code  
Minneapolis MN 55405

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251391

Date of Disbursement

/   /

Amount of Each Disbursement this Period

510.18

B.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City State Zip Code  
Minneapolis MN 55479

Purpose of Disbursement  
Memo Entry

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

499.80

C.

Full Name (Last, First, Middle Initial)

American Air

Mailing Address 4333 Amon Carter Blvd.

City State Zip Code  
Fort Worth TX 76155

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251406

Date of Disbursement

/   /

Amount of Each Disbursement this Period

499.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

1009.98

TOTAL This Period (last page this line number only) .....

58511.56

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 29

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)  
EMILY'S LIST

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

Candidate Name  
EMILY'S LIST

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D251352

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
FISHER FOR OHIO

Mailing Address PO BOX 1418

City COLUMBUS State OH Zip Code 43216

Purpose of Disbursement  
Contribution

Candidate Name  
Lee Irwin Fisher

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District:

Transaction ID: D251417

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

womenwinning

Mailing Address 2324 W. University Ave. Ste. 120B

City  
Saint Paul

State  
MN

Zip Code  
55114

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D251348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

1500.00